



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

## MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES COMMISSION

### Annual Report

January 23, 2004

The Honorable Governor Thomas Vilsack  
Office of the Governor  
State Capitol Building  
Des Moines, IA 50319

Michael E. Marshall  
Secretary of the Senate  
State Capitol Building  
Des Moines, Iowa 50319

Margaret A. Thompson  
Chief Clerk of the House  
State Capitol Building  
Des Moines, Iowa 50319

### INTRODUCTION

Iowa Code chapter 225C.6 requires the MH/DD to annually submit to the Governor and the General Assembly:

- Recommendations formulated by the Commission for changes in law
- A report concerning the activities of the Commission

This is the annual report for calendar year 2003.

### ACTIVITIES OF THE COMMISSION IN 2003

The major activity of the MHDD Commission this year was developing and issuing a comprehensive blueprint for change of the service system for adults with disabilities, as identified in the following section. This activity involved countless hours of data collecting, analysis, information sharing, workgroup meeting time, discussion and advocacy among MHDD Commissioners and a large number of interested volunteers. More than 150 people representing individuals with disabilities, family members, advocacy groups, residential services, treatment services, vocational services, county supervisors, county CPCs, DHS staff, judicial advocates, and others participated in developing this consensus document.

Other activities of the Commission in 2003 included:

1. Accrediting centers, services, and programs. Approximately 81 entities were presented to the Commission for accreditation in 2003.
2. Reviewing county plan amendments and making recommendations to the Director of the Department of Human Services. The Commission reviewed seven proposed county plan amendments in 2003.

3. Recommending an allowed growth factor adjustment to the Governor for the FY 06 state budget.

## RECOMMENDED CHANGES IN LAW THROUGH THE MHDD SYSTEM REDESIGN REPORT

In 2003, the Commission recommended a comprehensive blueprint for change of the system for delivering and funding services for adults with mental illness, developmental disabilities, and brain injuries. That blueprint is a report called the “MHDD System Redesign Report”, issued to Governor Thomas J. Vilsack and the 80th General Assembly, December 31, 2003, and amended January 23, 2004. The report embodies most of the Commission’s recommendations for changes in law this year. Rather than repeat those recommendations here, the Executive Summary of the report is enclosed with this letter. You can read the full report on the DHS web site at <http://www.dhs.state.ia.us/publications.asp>.

## RECOMMENDED CHANGES IN LAW THROUGH APPROPRIATIONS BILL

The Governor’s Budget Report for fiscal year 2005, released January 16, 2004, included a request for 5 million dollars from the general fund for “MHDD Health Redesign” (page 62 of the budget report). Funding for MHDD health redesign and for expanded Medicaid funding to alleviate waiting lists would come from a 60 cent per pack increase on cigarettes. The MHDD Commission supports and recommends this appropriation. The appropriation would be used to begin or maintain selected programs that have been proven to be of great benefit to individuals with mental illness, developmental disabilities, or brain injury. A list of programs that would benefit and the appropriation amounts is enclosed with this letter.

## OTHER RECOMMENDED CHANGES IN LAW

- 1. Parity.** The MH/DD Commission strongly urges the enactment of parity legislation that covers persons with mental illness. The inclusion of parity for substance abuse illness is also supported.
- 2. Relationship between the Department of Human Services (DHS) and the Department of Corrections (DOC).** The Commission is concerned that more and more individuals with mental illness appear to be winding up in correctional settings. The Commission recommends closer coordination and communication between DHS, county Central Points of Coordination (CPCs), and DOC specifically to:
  - Improve transition between correctional settings and community-based settings for offenders with mental illness and developmental disability.
  - Increase funding for, and provide adequate treatment of offenders with mental illness and developmental disabilities while in correctional settings.
  - Decrease the number of individuals with mental illness in correctional settings.
- 3. Children’s MH and DD services:** The Commission is very concerned that Iowa’s system of services for children with mental health issues or developmental disabilities is particularly fragmented and dysfunctional. This situation is worsening in the context of increased restrictions on reimbursement for mental health services for children with emotional and behavioral disorders. Increasingly parents must relinquish parental rights in order to obtain needed services for their children from the child welfare system. This year the MHDD Commission is launching an initiative to propose a coordinated system of services for children with mental health needs or developmental disabilities. This effort will involve families, service providers, DHS, the Department of Public Health, the Department of Education, the juvenile justice system, and many advocacy groups and others who are concerned about helping children with disabilities.
- 4. Compliance with Olmstead:** The Commission urges full support and funding for the Iowa Plan for Community Development as developed and implemented by the Olmstead Real Choices Consumer Task Force in an effort to fully comply with the Olmstead decision.

**5. Enhance support and training for direct-care workers.** Recruitment to these positions is an ongoing problem, and turnover is extremely high. These types of positions are vital to an effective service delivery system and require additional support. Training requirements should be increased and implemented and salaries, benefits, and incentives should be increased.

**6. Personal Assistance Services:** Funding should be made available for consumer-controlled personal assistance services for all Iowans with disabilities. The state must be a contributor to this funding, but it should also pursue federal funding for this.

**7. Develop a statewide system of peer support:** Fund and expand a consumer-driven network covering the entire state to provide peer support and counseling, and opportunities for self-advocacy for Iowans with all types of disabilities.

**8. State funding share to counties.** It is essential to increase the amounts appropriated for allowed growth and community services funds to maintain the integrity of the MHDD system. Not doing so will result in decreased access to and quality of services.

**9. Eliminate waiting lists.** The Commission requests adequate funding to eliminate waiting lists for services and community supports which aid individuals with disabilities.

**10. Fund MHDD Commission activities.** Increased funding for MHDD Commission activities is critical to:

- Develop and pursue strategies to maximize federal funding
- Continue to provide technical assistance to accredited providers, assuring the quality of service available throughout the state.
- Perform duties of the Commission as proscribed by Iowa Code Section 225C.6.

Respectfully,

Michael Bergan  
Chair, MH/DD Commission

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CC: Legislative Services Agency  
Caucus Staff

Enclosures:  
Executive Summary of the MHDD System Redesign Report  
List of program benefits from 5 million appropriation proposal